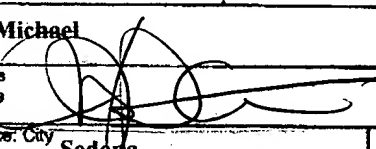
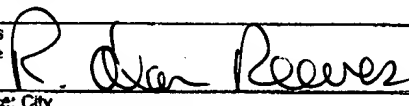



SUPPLEMENTAL DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

Direct all correspondence to: <input type="checkbox"/> Customer Number: <input type="text"/>		OR <input checked="" type="checkbox"/> Correspondence address below	
Name Robert E. Strauss			
Address 74527 Moss Rose Drive			
Address			
City Palm Desert		State California	ZIP 92260
Country U.S.	Telephone 760 773-0745	Fax 760 773-0745	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
Name of Sole or First Inventor: <input type="checkbox"/>		A petition has been filed for this unsigned inventor	
Given Name Michael		Family Name or Surname Stevenson	
Inventor's Signature 			Date
Residence: City Sedona	State Arizona	Country U.S.	Citizenship U.S.
Mailing Address 1200 Soldier Pass Road			
Mailing Address			
City Sedona		State Arizona	ZIP 86336 Country U.S.
Name of Second Inventor: <input type="checkbox"/>		A petition has been filed for this unsigned inventor	
Given Name Robert		Family Name or Surname Reeves	
Inventor's Signature 			Date
Residence: City Cottonwood	State Arizona	Country U.S.	Citizenship U.S.
Mailing Address 845 Oasis Drive			
Mailing Address			
City Cottonwood		State Arizona	ZIP 86326 Country
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/ 02A or 02LR attached hereto.			

**DECLARATION****ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page ----- of -----

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Matthew P.		Stevenson	
Inventor's Signature 		Date	
Residence: City	Sedona	State	Arizona
		Country	U.S.
Citizenship U.S.			
Mailing Address 10 San Mateo Circle			
Mailing Address			
City	Sedona	State	Arizona
		Zip	86336
		Country	U.S.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.